PTO/SB/30 (09-04)

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Request **Application Number** 09/661,498 For September 14, 2000 Filing Date Continued Examination (RCE) Transmittal Alnoor M. SHIVJI First Named Inventor Address to: 2665 MS RCE Art Unit Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 S. H. D. Nguyen **Examiner Name** Attorney Docket Number 4450-0418P

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

amendments encl	uired under 37 CFR 1.114 Note: If the RCE is proper, are used with the RCE will be entered in the order in which they we wish to have any previously filed unentered amendment(s) en	ere filed u	nless applica	ant instructs otherwise. If			
	sly submitted. If a final Office action is outstanding, any considered as a submission even if this box is not chec		ments filed	after the final Office action			
i. Cor	i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on						
ii. 🔲 Oth	ii. Other						
b. Enclose	d .						
i. Amendment/Reply iii. Information Disclosure Statement (IDS)							
iiAffic	davit(s)/Declaration(s) iv. U Other						
2. Miscellaneous	7						
a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a							
period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)							
b. Other							
3. Fees The RC	E fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 w	vhen the	RCE is filed	•			
a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to							
Deposit Account No I have enclosed a duplicate copy of this sheet.							
i. X RCE	fee required under 37 CFR 1.17(e)						
ii. Exte	ension of time fee (37 CFR 1.136 and 1.17)						
	·						
iii. [] Oth	700.00						
b. X Check in	n the amount of \$ enclo	osed					
c. Payment by credit card (Form PTO-2038 enclosed)							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED							
Signature	many	Date	April 26	, 2005			
Name (Print/Type)	Michael R. Cammarata	Registra	ation No.	39,491			

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790.00 OP

PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032

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			7 "	0 1.4. '516				
Fees pursuant of the Consolid	tated Appropriation	ons Act, 2005 (H.R. 4818). Application Nu	mber	09/661,498			
FEE TR	ANSM	ITTAL	Filing Date		September 1	4, 2000		
			First Named In	ventor	Alnoor M. SH	IIVJI		
F0I	FY 200	<u> </u>	Examiner Name	е	S. H. D. Nguy	yen		
Applicant claims sm	all entity status.	See 37 CFR 1.27	Art Unit		2665			
TOTAL AMOUNT OF PA	YMENT	(\$) 790.00	Attorney Docke	t No.	4450-0418P			
METHOD OF PAYME	NT (check all t	hat apply)						
X Check Credit	Card N	Money Order	None Other	(please ide	ntify):	_		
Deposit Account De	posit Account Numb	er: 02-2448 Deposit	Account Name:	Birch, S	tewart, Kolasc	h & Birch, L	LP	
For the above-ide	ntified deposit a	account, the Directo	r is hereby authoriz	zed to: (che	eck all that apply	/)		
Charge fee(s) indicated bel	ow	Char	ge fee(s) ir	ndicated below,	except for th	e filing fee	
	additional fee(s	s) or underpayment and 1.17	of x Credi	it any over	payments			
FEE CALCULATION							•	
1. BASIC FILING, SEAR	H, AND EXAM	INATION FEES						
			SEARCH FEES		NATION FEE	_		
Application Type	Fee (\$)	Small Entity Fee (\$) Fee	Small Entity (\$) Fee (\$)	<u>.</u> Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)	
Utility	300	150 50		200	100			
Design	200	100 10	00 50	130	65			
Plant	200	100 30	00 150	160	80	-		
Reissue	300	150 50	00 250	600	300			
Provisional	200	100	0 0	0	0			
2. EXCESS CLAIM FEES							Small Entity	
Fee Description						<u>Fee (\$)</u>	Fee (\$)	
The state of the s								
Each claim over 20 (inclu	,					50	25	
Each claim over 20 (inclu Each independent claim o	over 3 (includin					200	100	
Each claim over 20 (inclu Each independent claim of Multiple dependent claim	over 3 (includin	ng Reissues)	o Boid (\$)		Multiple Depar	200 360		
Each claim over 20 (inclu Each independent claim of Multiple dependent claim	over 3 (includin	g Reissues)	e Paid (\$)	-	Multiple Depend	200 360 dent Claims	100 180	
Each claim over 20 (inclu Each independent claim of Multiple dependent claim	over 3 (includin	ng Reissues)	e Paid (\$)	-	Multiple Dependee (\$)	200 360	100 180	

Other (e.g.,	790.00				
SUBMITTED BY					
Signature	all the	Registration No. (Attorney/Agent)	39,491	Telephone	(703) 205-8000
Name (Print/Type)	Michael R. Cammarata			Date	April 26, 2005

Number of each additional 50 or fraction thereof

___ (round **up** to a whole number) x

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Extra Sheets

Non-English Specification, \$130 fee (no small entity discount)

Fee Paid (\$)

Fees Paid (\$)

Fee (\$)

3. APPLICATION SIZE FEE

- 100 =

Total Sheets

4. OTHER FEE(S)